



CHECK IN

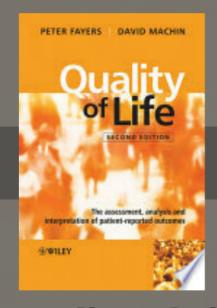
- 1. PROMs attempt to capture the clinician's and patient's joint expectations for the patients progress. True or False
- 2. PROMs measure success or failure of the Tx plan. True or False
- 3. One difficulty in measuring PROMs is that they are subjective. True or False
- 4. Subjective outcomes cannot be measured as well as objective ones. True or False



consistent description for Hillian 200 To secol foreign consistent production original states (specialists) Patient Reported Outcome Measures

PROMs

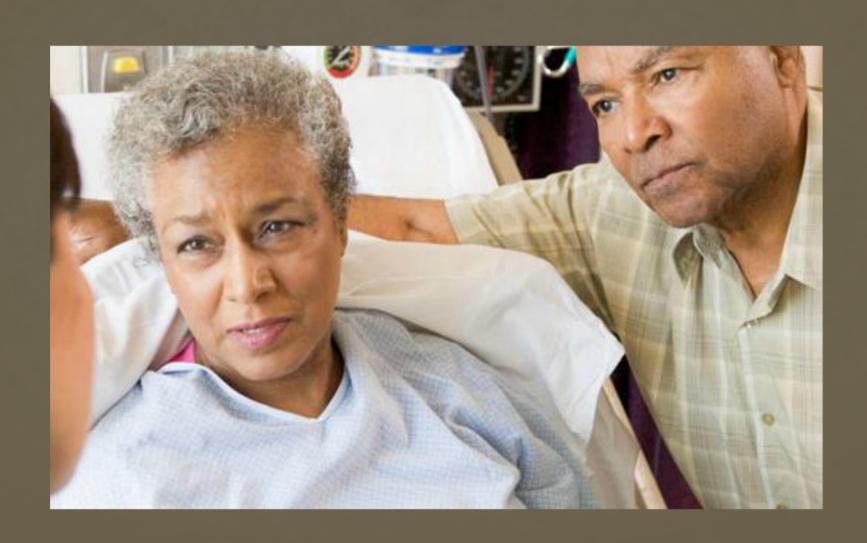




HISTORY

Quality of Life: The Assessment, Analysis and Interpretation of Patient Reported Outcome Measures By Peter M. Fayers, David Machin 2007, 2nd Ed.

"observers are poor judges of patients' opinions"



Quality of Life QoL

- Pts consider a different bar for health related quality of life when ill
- Pain, nausea and vomiting underestimated considered a trade-off for Tx by both clinicians & pts
- Symptoms as consequences
- Most clinicians report they would not tolertate them

The Elusive QoL

What are the Red Flags in Capturing Patient Impressions?

Who is asking
Who answering
Why are they asking

Large Degree of **Subjectivity** Is It **Worth** Measuring?



A Correlation was Found Between... Assessing QoL & Adherence to Tx





PROMS

Definition

Patient-reported outcome measures (PROMs) capture the patient's perspective of the impact of care intervention on quality of life and ability to function. These statistically-valid patient-centered measures complement traditional medical outcome measures, such as surgical complications and mortality rates, to help clinicians understand long-term patient results.

Press Ganey

THINK PATIENT-FOCUSED QUESTIONS:

- (1) "Given my personal characteristics, conditions and preferences, what should I expect to happen to me?"
- (2) "What are my options and what are the benefits and harms of those options?"
- (3) "What can I do to improve the outcomes that are most important to me?"
- 4) "How can the health care system improve my chances of achieving the outcomes I prefer?"

All Outcomes are Commonly & Broadly Classified Into-

CLINICAL (e.g. cure, survival), C,CG,Pt

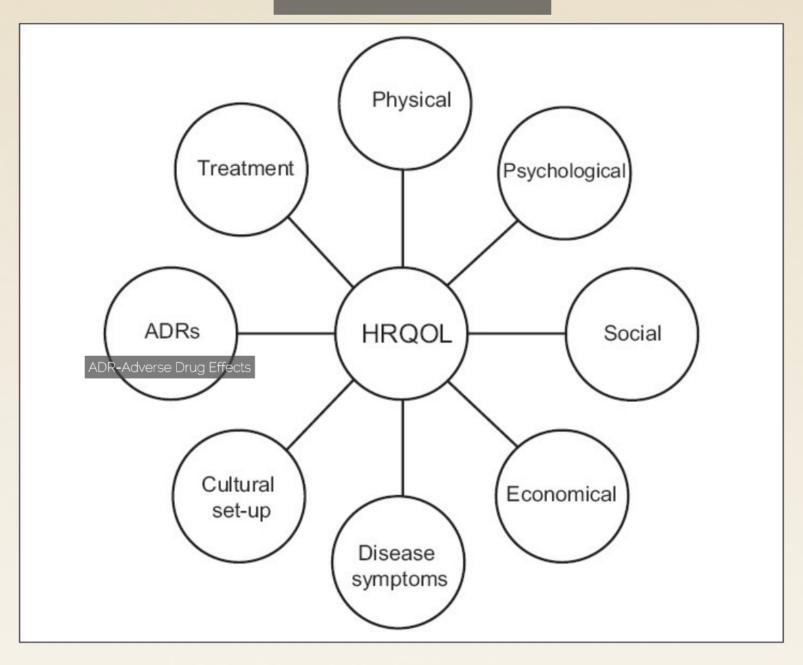
HUMANISTIC (e.g. role performance, emotional status) CG, Pt

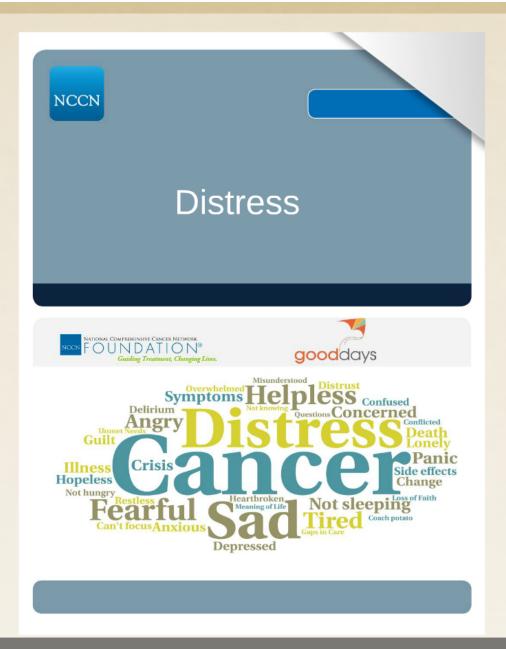
ECONOMICAL (e.g. expenses, saving) CG, Pt

C- Clinician CG=Care Giver Pt= Patient



Multi-Dimensional



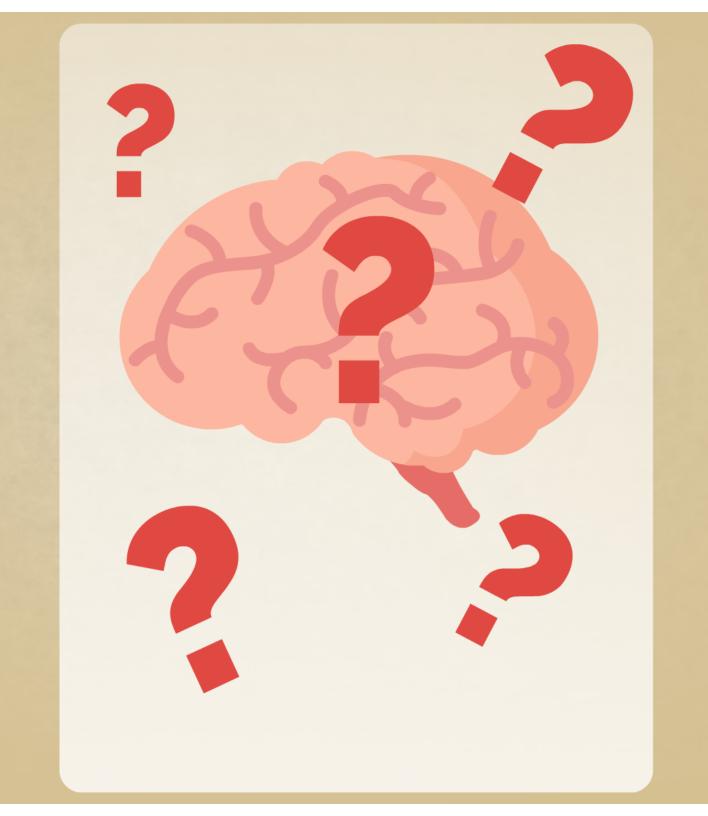


https://www.nccn.org/patients/guidelines/distress/files/assets/basic-html/page-1.html

STRIES? all history of disease, areas, measuring or harm, and measuring s down the list of normated s, the substantive role of ign becomes increasingly

What Is The Role Of Hospital Registries?





PURPOSE OF REGISTRIES?
describing the natural history of disease,
determining effectiveness, measuring or
monitoring safety or harm, and measuring
quality. As one reads down the list of nominated
purposes of registries, the substantive role of
PROs in registry design becomes increasingly
clear

We can measure it --

We can collect it --

We can use it in our programs!

P.S. PROMs Are Evidence



Patient-Centered Outcomes Research Institute

RECENT STUDIES USED DATA + PROMs TO EVALUATE

-Surveillance

-Shared Decision Making

-Technology

-Compliance (for Oral Chemo)

-Palliative Care

-Communication & Perception



Ask The Questions

Identify The Problem/s

Are There Existing Data Sets?

Can A PROM Add Value

WARNING: DO NOT START WITH WHO WILL DO IT



How To Measure

Develop the Measuring Tool or Instrument

Consider Who Will Use It

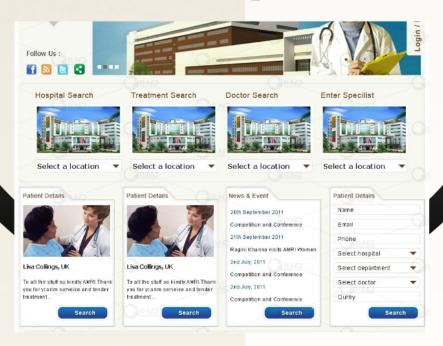
Who Will Be Measured

For How Long & When





How Will the Results Be Used & Reported?



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Which of the following might be considered measurable for PROMs?

post Tx sexual function

exercise frequency & duration

religious beliefs

depression